

Instructions for Completing In Forma Pauperis (IFP) Forms

The Petition to Proceed In Forma Pauperis is to be completed if you feel you cannot afford the filing fees associated with your case. If the Judge agrees you cannot afford the fees, based on your answers provided on the IFP, then the County will pay the fees for you. If the Judge feels you can pay the fees you will then need to pay the fees either in the Prothonotary's Office or the Clerk of Courts (both located in the Courthouse on the 1st floor).

1. Fill out the IFP to the best of your abilities, completing EVERY line. **LEAVE NO BLANK LINES.**
2. Be sure the top heading is completed EXACTLY THE SAME on all forms. In other words, be sure the Plaintiff is shown as the same and the Defendant is shown as the same on every form.
3. At # 1 on page 1, be sure to circle whether you are the Plaintiff or the Defendant. If you were the original defendant you will continue to stay as such. Meaning, for example, if you are filing for custody modification and you are the defendant under the original filings you are still the defendant. You are still the defendant, but also the Petitioner. You are the one who is petitioning the court. The other party is still the Plaintiff, but also is now the Respondent.
4. **DO NOT use "N/A" or "Not Applicable."** Everything is applicable, even if the answer is "none" or "0." **DO NOT** use dashes or cross anything out.
5. **DO USE "none" or "0" if necessary.**
6. Be sure to indicate monies coming in and out PER MONTH. For example, if you receive support payments of \$500 per month write this as "\$500/mo."
7. Pay special attention to 3.(f) Debts and Obligations. This is where you list all your monthly expenses. For example, if you pay a monthly health or car insurance premium, you will want to list this here under "Other."
8. Make sure you sign the forms on the line above "Plaintiff/Defendant." With IFPs there are 2 places for you to sign: bottom of the first page and on page 4.

IN THE COURT OF COMMON PLEAS OF CRAWFORD COUNTY, PENNSYLVANIA

CIVIL ACTION

vs.

AD _____

PETITION TO PROCEED IN FORMA PAUPERIS
PURSUANT TO Pa. R.C.P. 240

I, the undersigned, do hereby state under oath:

1. My name is _____ and I live at _____

2. I have filed the above action but I do not have the financial resources to pay the costs of filing such action and any other costs of litigation.

3. I am not represented by an attorney in this matter.

4. I have attached an Affidavit to this Petition concerning my financial situation.

5. I request that the Court allow me to proceed without paying any costs or fees with respect to this litigation.

6. I verify that the statements made in this Petition are true and correct to the best of my knowledge, information and belief. I further understand that any false statements made herein are subject to the penalties of 18 Pa. C.A. § 4904 relating to unsworn falsifications to authorities.

Date: _____

Petitioner/Plaintiff

IN THE COURT OF COMMON PLEAS OF CRAWFORD COUNTY, PENNSYLVANIA

CIVIL ACTION

vs.

AD _____

AFFIDAVIT IN SUPPORT OF PETITION TO PROCEED INFORMA PAUPERIS
PURSUANT TO Pa. R.C.P. 240

1. I am the (Plaintiff) (Defendant) in the above matter and because of my financial condition am unable to pay the fees and costs of prosecuting or defending the action of proceeding.

2. I am unable to obtain funds from anyone, including my family and associates, to pay the cost of litigation.

3. I represent that the information below relating to my ability to pay the fees and costs is true and correct.

(a) Name: _____
Address: _____

(b) Employment.

If you are presently **employed**, state:

Employer: _____

Address: _____

Salary or wages per month: _____

Type of work: _____

If you are presently **unemployed**, state:

Date of last employment: _____

Salary or wages per month: _____

Type of work: _____

(c) Other income within the past twelve months:

Business or profession: _____

Other self-employment: _____

Interest: _____

Dividends: _____

Pension and Annuities: _____

Social Security benefits: _____

Support Payments: _____

Disability payments: _____

Unemployment compensation and supplemental benefits: _____

Workman's Compensation: _____

Public Assistance: _____

Other: _____

(d) Other contributions to household support:

(Wife) (Husband) Name: _____

If your (Wife) (Husband) is employed, state:

Employer: _____

Salary or wages per month: _____

Type of work: _____

Contributions from children: _____

Contributions from parents: _____

Other contributions: _____

(e) Property owned:

Cash: _____

Checking account: _____

Savings account: _____

Certificates of Deposit: _____

Real Estate (including home): _____

Motor Vehicle: Make _____ Year _____

 Cost: \$ _____ Amount Owed: \$ _____

Stock/Bonds: _____

Other: _____

(f) Debts and obligations:

Mortgage: _____

Rent: _____

Loans: _____

Other: _____

(g) Persons dependent upon you for support:

(Wife) (Husband) Name: _____

Children, if any:

Name: _____ Age: _____

_____ Age: _____

_____ Age: _____

_____ Age: _____

Other persons: _____

Name: _____

Relationship: _____

4. I understand that I have continuing obligation to inform the Court of improvement in my financial circumstances which would permit me to pay the costs incurred herein.

5. I verify that the statements made in this affidavit are true and correct to the best of my knowledge, information and belief. I understand that false statements made herein are subject to the penalties of 18 Pa. C.S. § 4904 relating to unsworn falsifications to authorities.

Date: _____

Petitioner/Plaintiff

IN THE COURT OF COMMON PLEAS OF CRAWFORD COUNTY, PENNSYLVANIA
CIVIL ACTION

vs.

AD _____

ORDER

AND NOW, _____, 20____, upon consideration of the Petition filed by the
(plaintiff/defendant) in this action, and supported by an Affidavit attached thereto, all being pursuant to Pa. R.C.P.
(circle one)
240, the (plaintiff/defendant) is granted leave to proceed in forma pauperis at this time.
(circle one)

The (plaintiff/defendant) is directed to inform the Prothonotary's office or the Court if any improvement in
(circle one)
his/her financial circumstances that would permit him/her to pay the cost incurred in this action and shall be
responsible for doing so upon an improvement of his/her financial condition.

BY THE COURT:

J.

